

Docket No. UV-98IN RE U.S. PATENT APPLICATION
APPLICATION NUMBER 09/378,533CONFIRMATION NUMBER 9255TRANSMITTAL COVER LETTER FOR FACSIMILE TRANSMISSION

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OCT 26 2005Attention: Examiner Andrew Y. Koenig
Art Unit: 2611

PATENT CENTRAL FAX NUMBER: (571) 273-8300

THE SENDER IS:

Evelyn C. Mak
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Fax: (212) 597-9090CLIENT NO. 003597.0098CERTIFICATION OF FACSIMILE TRANSMISSION

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PATENTS
UV-98

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Pamela L. McKissick et al.
Application No. : 09/378,533 Confirmation No.: 9255
Filed : August 20, 1999
For : ELECTRONIC PROGRAM GUIDE WITH
ADVANCE NOTIFICATION
Art Unit : 2611
Examiner : Andrew Y. Koenig

New York, New York 10020
October 26, 2005

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P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Supplemental Amendment;
☐ Letter to Official Draftsperson; ☐ a Reply to Office
Action; ☐ a Supplemental Information Disclosure Statement; ☐
a Declaration; ☐ a Power of Attorney; ☐ a Submission of
Formal Drawings; ☐ formal drawings; to be filed in the above
identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

10/27/2005 CNGUYEN 00000044 061075 09378533

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The additional fee has been calculated as shown below:

| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEES |
|---|---|------------------|----------|--------------------|
| TOTAL CLAIMS | - | * = 0 | X \$ 50 | = \$ 0.00 |
| INDEPENDENT CLAIMS | - | ** = 0 | X \$ 200 | = \$ 0.00 |
| FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM | | | + \$ 360 | = \$ 0.00 |

* If less than 20, insert 20. TOTAL \$ 0.00
 ** If less than 3, insert 3.

[] A check in the amount of \$_____ in payment of the additional claims is transmitted herewith.

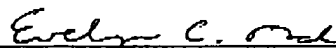
[] Please charge \$_____ to Deposit Account No. 06-1075, Order No._____, in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075, Order No. 003597-0098. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- [X] The following extension is applicable to the Response filed herewith; [] \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [X] \$1,020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); [] \$2,160.00 extension fee for response within fifth month pursuant to 37 C.F.R. § 1.136(a).
- [] A check in the amount of [] \$120.00; [] \$450.00; [] \$1020.00; [] \$1,590.00; [] \$2,160.00; in payment of the extension fee is transmitted herewith.
- [X] Please charge the [] \$120.00; [] \$450.00; [X] \$1020.00; [] \$1,590.00; [] \$2,160.00; extension fee to Deposit Account No. 06-1075, Order No. 003597-0098. A duplicate copy of this transmittal letter is transmitted herewith.
- [X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075, Order No. 003597-0098. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,


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Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

After entry of the amendment in the Reply to Office
Action filed by applicants on August 3, 2005, please further
amend the application as follows:

Amendments to the Claims are reflected in the listing
of claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.